

RAZ/SCJ:BDF/KAW  
F.#2014R00379

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK

U.S. DISTRICT COURT  
EASTERN DISTRICT OF NEW YORK  
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UNITED STATES OF AMERICA

I N D I C T M E N T

- against -

**CR 14 278**  
Cr. No. 278

GENE THORNHILL,  
also known as  
"Eugene Ernest Tripetsky,"  
TINA THORNHILL,  
also known as  
"Valentina Schteinfas  
Abdina" and "Valentina  
Schteinfas" and  
ROMAN JOHNSON,

(T. 18, U.S.C., §§ 982(a)(1),  
982(a)(7), 982(b), 1035(a)(1),  
1035(a)(2), 1349, 1519,  
1957(a), 1957(b), 2 and 3551  
et seq.; T. 21, U.S.C.,  
§ 853(p))

ROSS, J.  
GO, M.J.

Defendants.

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THE GRAND JURY CHARGES:

INTRODUCTION

At all times relevant to this Indictment, unless  
otherwise indicated:

I. Background

A. The Medicare Program

1. The Medicare program ("Medicare") was a federal  
health care program providing benefits to persons who were over  
the age of 65 or disabled. Medicare was administered by the  
Centers for Medicare and Medicaid Services ("CMS"), a federal  
agency under the United States Department of Health and Human

Services. Individuals who received benefits under Medicare were referred to as Medicare "beneficiaries." Medicare was a "health care benefit program," as defined by Title 18, United States Code, Section 24(b).

2. Medicare included coverage under two primary components, hospital insurance ("Medicare Part A") and medical insurance ("Medicare Part B"). Medicare Part B covered the costs of physicians' services and outpatient care, including physical therapy, occupational therapy and diagnostic tests. Generally, Medicare Part B covered these costs only if, among other requirements, they were medically necessary, ordered by a physician and not induced by the payment of remuneration.

3. In order to enroll in the Medicare program and retain Medicare billing privileges, the enrolled entity was required to be legally authorized to practice medicine by the state in which the medical services were rendered. New York state law prohibits non-physicians from owning and controlling medical service corporations.

4. Medical providers submitted a Medicare Enrollment Application ("Medicare Application") to Medicare to participate in Medicare and submit claims for reimbursement. The Medicare Application required a provider to supply Medicare with information, such as insurance forms, Internal Revenue Service forms and corporate documents. In order to electronically

receive funds from the Medicare program, providers also submitted Electronic Funds Transfer Authorization Agreements, which listed the bank account in which Medicare would deposit reimbursements.

5. Pursuant to Medicare statutes and regulations, an entity enrolled in the Medicare program was required to disclose on its Medicare Application the full and complete information of each person with an ownership or control interest in the enrolled entity as a condition for participating in the Medicare program.

6. Medicare required participating health care providers to maintain their original medical records on beneficiaries for whom they submitted claims. Medicare further required that these records be made available upon request to review and audit for the purpose of determining whether the claims should be, or should previously have been, paid.

7. Medical providers certified to participate in Medicare, whether clinics or individuals, were assigned a provider identification number ("PIN") or provider transaction access number ("PTAN") for billing purposes. After a medical provider rendered a service, the provider was required to use its assigned PIN/PTAN when submitting a claim for reimbursement to Medicare.

8. Medical providers were authorized to submit claims to Medicare only for services they actually rendered and were required to maintain patient records verifying the provision of services. By submitting a claim, the provider certified, among other things, that the services were rendered to the patient and were medically necessary.

9. Providers submitted to Medicare claims using billing codes, also called current procedural terminology or "CPT" codes, which were numbers referring to specific descriptions of the medical services provided to beneficiaries.

B. The Defendants and Relevant Entities

10. Neponsit Medical PC ("Neponsit"), Juan A. Medina Medical Office, PC ("JMMO") and Galaxy Medical PC ("Galaxy") (together, the "Thornhill Clinics") were New York professional corporations located at 712/714 Beach 20th Street, Far Rockaway, New York 11691-3502. Neponsit operated at that location from approximately September 2009 to September 2011; JMMO operated at that location from approximately September 2011 to February 2012; and Galaxy operated at that location from approximately January 2012 to August 2012. The Thornhill Clinics were each certified to participate in the Medicare program under their own PINs/PTANs. The Thornhill Clinics purported to provide, among other things, medically necessary vitamin infusions, physical therapy, ultrasounds, echocardiograms and other medical services

to Medicare beneficiaries and submitted claims to Medicare for such services.

11. In addition to the location at 712/714 Beach 20th Street in Far Rockaway, JMMO had additional offices at 870 Central Avenue, Far Rockaway, New York 11691 and 820 Suffolk Avenue, Brentwood, New York 11717-4469.

12. Claim Torrent, Inc. was a New York corporation doing business in, among other places, Manhattan and Far Rockaway, New York. Claim Torrent was a billing company that was authorized to submit, and submitted and caused to be submitted, claims to Medicare on behalf of medical professionals at the Thornhill Clinics.

13. The defendant GENE THORNHILL, also known as "Eugene Ernest Tripetsky," was an owner and manager of the Thornhill Clinics and Claim Torrent.

14. The defendant TINA THORNHILL, also known as "Valentina Schteinfas Abdina" and "Valentina Schteinfas," was an owner of the Thornhill Clinics and a manager of Claim Torrent.

15. The defendant ROMAN JOHNSON was a physician licensed to practice medicine by the State of New York. From approximately September 2009 to May 2011, JOHNSON worked as a physician at Neponsit and held the title of "medical director."

## II. The Health Care Fraud Scheme

16. From approximately September 2009 through October 2012, the defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, agreed to execute a fraudulent scheme in which they (a) submitted and caused to be submitted claims to Medicare for services, such as vitamin infusions, physical therapy, occupational therapy and diagnostic tests which were not medically necessary, not provided and otherwise did not qualify for reimbursement by Medicare and (b) engaged in deceptive acts and contrivances intended to hide information, mislead, avoid suspicion and avert further inquiry into the nature of the services offered at the Thornhill Clinics.

17. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, submitted and caused to be submitted to Medicare false and fraudulent claims for physical therapy and occupational therapy that were not medically necessary and were not provided. For example:

(a) Claims for purported physical and occupational therapy were submitted on behalf of the same patients for months and even years at a time. This extended physical and occupational therapy was not medically necessary to treat chronic conditions and was not actually provided.

(b) At the Thornhill Clinics, physical therapists generally provided only initial evaluations and re-

evaluations. The actual physical therapy services were performed by aides who were not licensed or authorized under New York State law to perform physical therapy. Under Medicare, physical therapy services are only reimbursable if they are performed by a licensed physical therapist, or a licensed physical therapist assistant directly supervised by a licensed physical therapist.

18. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, submitted and caused to be submitted to Medicare false and fraudulent claims for vitamin infusions that were not medically necessary and not provided. For example:

(a) Vitamin infusions were provided to patients with no medical need to receive those vitamins through an infusion rather than through other means, such as orally or via injection.

(b) Vitamin infusions were provided by individuals with no medical license who were not authorized by the State of New York to provide infusions.

(c) Vitamin infusion services were provided without supervision from a licensed medical professional legally authorized to supervise infusions.

19. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, submitted and caused to be

submitted to Medicare false and fraudulent claims for repetitive and medically unnecessary diagnostic tests, including sonograms and echocardiograms.

20. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, submitted false and fraudulent claims to Medicare indicating, through the use of CPT codes, that certain procedures had been performed by doctors, physical therapists and occupational therapists at the Thornhill Clinics. In fact, those professionals did not perform those procedures and, on many occasions, those professionals were not working at the clinic on the days the procedures purportedly were performed.

21. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, fraudulently caused the Thornhill Clinics to be incorporated in the name of medical professionals, as required by New York state law requiring that medical professional corporations be owned, operated and controlled by a medical professional and corresponding Medicare statutes and regulations requiring that enrolled entities be legally authorized to practice medicine in the state in which they operate.

22. The defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, submitted and caused to be submitted applications to Medicare falsely listing only medical

professionals as the individuals with ownership interests in the Thornhill Clinics.

23. In reality, the Thornhill Clinics were not owned, operated and controlled by medical professionals. Instead, the actual owners of the Thornhill Clinics were GENE THORNHILL and TINA THORNHILL, neither of whom was a licensed medical professional.

24. After causing the Thornhill Clinics to be enrolled in the Medicare program under false pretenses, the defendants GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, caused the submission of false and fraudulent claims to Medicare. In order to make these claims appear legitimate, GENE THORNHILL, TINA THORNHILL and ROMAN JOHNSON, together with others, created medical files containing false information about the services provided and the medical necessity of those services.

25. The defendants GENE THORNHILL and TINA THORNHILL submitted medical files containing false information to Medicare and law enforcement agencies to conceal the fraud.

(a) On or about October 15, 2012, GENE THORNHILL and TINA THORNHILL provided and caused to be provided to authorized agents of Medicare medical records created to support claims for physical therapy and other services purportedly provided to five beneficiaries. These records were materially

different from records previously acquired by Medicare agents at Galaxy during an August 7, 2012 on-site visit.

(b) On or about September 20, 2012, in response to a Grand Jury Subpoena, GENE THORNHILL and TINA THORNHILL provided and caused to be provided to the Federal Bureau of Investigation copies of medical files containing false information about the services provided to Medicare beneficiaries and the medical necessity of those services.

26. Between approximately December 2009 and July 2012, Neponsit submitted approximately \$9.4 million in claims to Medicare. Between approximately January 2010 and October 2012, JMMO submitted approximately \$2.9 million in claims to Medicare. Between approximately July 2011 and August 2012, Galaxy submitted approximately \$1.9 million in claims to Medicare.

COUNT ONE  
(Health Care Fraud Conspiracy)

27. The allegations contained in paragraphs 1 through 26 are realleged and incorporated as if fully set forth in this paragraph.

28. In or about and between September 2009 and October 2012, both dates being approximate and inclusive, within the Eastern District of New York and elsewhere, the defendants GENE THORNHILL, also known as "Eugene Ernest Tripetsky," TINA THORNHILL, also known as "Valentina Schteinfas Abdina" and

"Valentina Schteinfas," and ROMAN JOHNSON, together with others, did knowingly and willfully conspire to execute a scheme and artifice to defraud Medicare, a health care benefit program, and to obtain, by means of materially false and fraudulent pretenses, representations and promises, money and property owned by, and under the custody and control of, Medicare, in connection with the delivery of and payment for health care benefits, items and services, contrary to Title 18, United States Code, Section 1347.

(Title 18, United States Code, Sections 1349 and 3551 et seq.)

COUNT TWO

(Falsification of Records in Federal Investigation)

29. The allegations contained in paragraphs 1 through 26 are realleged and incorporated as if fully set forth in this paragraph.

30. In or about and between August 2012 and October 2012, both dates being approximate and inclusive, within the Eastern District of New York and elsewhere, the defendants GENE THORNHILL, also known as "Eugene Ernest Tripetsky," and TINA THORNHILL, also known as "Valentina Schteinfas Abdina" and "Valentina Schteinfas," together with others, did knowingly alter, conceal, cover up, falsify and make false entries in a record, document and tangible object, specifically, records

relating to the treatment of Medicare beneficiaries, with the intent to impede, obstruct and influence the investigation and proper administration of such matters within the jurisdiction of a department and agency of the United States, specifically, the Department of Health and Human Services, and in relation to and contemplation of any such matter and case.

(Title 18, United States Code, Sections 1519, 2 and 3551 et seq.)

COUNT THREE

(False Statements Relating to Health Care Matters)

31. The allegations contained in paragraphs 1 through 26 are realleged and incorporated as if fully set forth in this paragraph.

32. In or about and between September 2009 and October 2012, both dates being approximate and inclusive, within the Eastern District of New York and elsewhere, the defendants GENE THORNHILL, also known as "Eugene Ernest Tripetsky," TINA THORNHILL, also known as "Valentina Schteinfas Abdina" and "Valentina Schteinfas," and ROMAN JOHNSON, together with others, in matters involving one or more health care benefit programs, including Medicare, did knowingly and willfully (a) falsify, conceal and cover up by trick, scheme and device material facts, and (b) make materially false, fictitious and fraudulent statements and representations, and make and use materially

false writings and documents knowing the same to contain materially false, fictitious and fraudulent statements and entries, in connection with the delivery of and payment for health care benefits, items and services, in that the defendants submitted and caused to be submitted Medicare applications that falsely represented that the only owner of the enrolled medical facility was a doctor, falsely represented altered medical records as original medical records and made false and misleading statements concerning services provided to Medicare beneficiaries.

(Title 18, United States Code, Sections 1035(a)(1), 1035(a)(2), 2 and 3551 et seq.)

COUNTS FOUR THROUGH NINE  
(Money Laundering - Unlawful Monetary Transactions)

33. The allegations contained in paragraphs 1 through 26 are realleged and incorporated as if fully set forth in this paragraph.

34. On or about the dates identified below, within the Eastern District of New York and elsewhere, the defendants GENE THORNHILL, also known as "Eugene Ernest Tripetsky," and TINA THORNHILL, also known as "Valentina Schteinfas Abdina" and "Valentina Schteinfas," did knowingly and intentionally engage and attempt to engage in monetary transactions, specifically, deposits, withdrawals and transfers of funds and monetary

instruments, in and affecting interstate commerce, in criminally derived property that was of a value greater than \$10,000 and that was derived from specified unlawful activity, specifically, false statements relating to health care matters, in violation of Title 18, United States Code, Sections 1035(a)(1) and 1035(a)(2), and conspiracy to commit health care fraud, in violation of Title 18, United States Code, Section 1349, knowing that the property involved in such monetary transactions represented the proceeds of some form of unlawful activity, as follows:

Count	Approx. Date	Transaction
FOUR	05/02/2010	Negotiated check number 1218 drawn on Citibank account number *****6364, held in the name of Neponsit, in the approximate amount of \$28,540.00 payable to Triboro Resources
FIVE	06/05/2011	Negotiated check number 2413 drawn on Citibank account number *****6364, held in the name of Neponsit, in the approximate amount of \$17,351.00 payable to THORNHILL GENE
SIX	6/7/2012	Negotiated check number 1710 drawn on JP Morgan Chase bank account number *****4026, held in the name of JMMO, in the approximate amount of \$38,241.00 payable to Claim Torrent Inc.
SEVEN	6/12/2012	Negotiated check number 1712 drawn on JP Morgan Chase bank account number *****4026, held in the name of JMMO, in the approximate amount of \$14,610.00 payable to Battery Park Diagnostic
EIGHT	08/20/2012	Negotiated check number 1114 drawn on TD Bank account number *****9658, held in the name of Galaxy, in the approximate amount of \$45,480.00 payable to M.T., an individual whose identity is known to the Grand Jury

Count	Approx. Date	Transaction
NINE	08/27/2012	Negotiated check number 1118 drawn on TD Bank account number *****9658, held in the name of Galaxy, in the approximate amount of \$24,807.00 payable to Claim Torrent, Inc.

(Title 18, United States Code, Sections 1957(a),  
1957(b) and 3551 et seq.)

CRIMINAL FORFEITURE ALLEGATION

35. The United States hereby gives notice to the defendants charged in Counts One through Three that, upon their conviction of any such offenses, the government will seek forfeiture in accordance with Title 18, United States Code, Section 982(a)(7), which requires any person convicted of such offenses to forfeit any property, real and personal, which constitutes or is derived, directly or indirectly, from proceeds traceable to such offenses. The United States further gives notice to the defendants charged in Counts Four through Nine that, upon their conviction of any such offenses, the government will seek forfeiture in accordance with Title 18, United States Code, Section 982(a)(1), which requires any person convicted of such offenses to forfeit any property, real and personal, involved in such offense, or any property traceable to such property.

36. If any of the above-described forfeitable property, as a result of any act or omission of the defendants:

(a) cannot be located upon the exercise of due diligence;

(b) has been transferred or sold to, or deposited with, a third party;

(c) has been placed beyond the jurisdiction of the court;

(d) has been substantially diminished in value; or

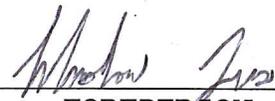
(e) has been commingled with other property which cannot be divided without difficulty;

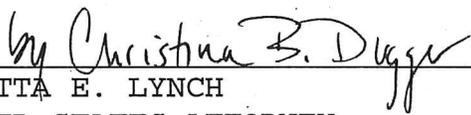
it is the intent of the United States, pursuant to Title 21, United States Code, Section 853(p), as incorporated by Title 18, United States Code, Section 982(b), to seek forfeiture of any

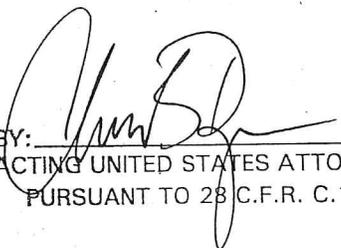
other property of such defendants up to the value of the  
forfeitable property described in this forfeiture allegation.

(Title 18, United States Code, Sections 982(a)(1),  
982(a)(7) and 982(b))

A TRUE BILL

  
\_\_\_\_\_  
FOREPERSON

  
\_\_\_\_\_  
LORETTA E. LYNCH  
UNITED STATES ATTORNEY  
EASTERN DISTRICT OF NEW YORK

BY:   
\_\_\_\_\_  
ACTING UNITED STATES ATTORNEY  
PURSUANT TO 28 C.F.R. C.131

  
\_\_\_\_\_  
JEFFREY KNOX  
CHIEF, FRAUD SECTION  
CRIMINAL DIVISION  
U.S. DEPARTMENT OF JUSTICE

No. \_\_\_\_\_

**UNITED STATES DISTRICT COURT**

*EASTERN District of NEW YORK*

**CRIMINAL DIVISION**

**THE UNITED STATES OF AMERICA**

vs.

*GENE THORNHILL, also known as "Eugene Ernest Tripetsky," TINA THORNHILL, also known as "Valentina Scheinfas Abdina" and "Valentina Scheinfas" and ROMAN JOHNSON*

Defendants.

**INDICTMENT**

(T. 18, U.S.C. §§ 982(a)(1), 982(a)(7), 982(b); 1035(a)(1), 1035(a)(2), 1349, 1519, 1957(a), 2 and 3551 et seq., T. 21, U.S.C. § 853(p))

A true bill.

*[Signature]*

Foreperson

Filed in open court this \_\_\_\_\_ day,

of \_\_\_\_\_ A.D. 20\_\_

Clerk

Bail, \$ \_\_\_\_\_

**Bryan D. Fields, Trial Attorney (718) 254-6033**  
**Katharine A. Wagner, Trial Attorney (718) 254-6158**